Fill in this informat	ion to identif	y your case:							
	oseph rst Name	D. Middle Name	Tagga Last Nar			01-	al. Male to the		
503	onda	Wilde Name				Che	eck if this is:		
500.0.2	rst Name	Middle Name	Tagga Last Nar			abla	An amended filing		
United States Bankrupt	cy Court for the:	MIDDLE DIS	T. OF PENNS	YLVANI	Α		A supplement showing postpetition chapter 13 income as of the following da		
Case number (if known)							MM / DD / YYYY		
fficial Form 106I							WIW BB / TTT		
chedule I: Your							12/		
esponsible for supplying notude information about	g correct inform It your spouse. ore space is nee	ation. If you are If you are separ ded, attach a se	married and rated and your sparate sheet to	not filing spouse is	ointly, and y not filing w	our ith y	I Debtor 2), both are equally spouse is living with you, you, do not include information any additional pages, write		
Part 1: Describe	Employmen	t	W. 40* - 4 - 1 - 4 - 10 - 10 - 10 - 10 - 10 -		VIII				
Fill in your employm information.	ent		Debtor 1				Debtor 2 or non-filing spouse		
If you have more than job, attach a separate with information about	page Emplo	oyment status	☐ Employe				☐ Employed  ✓ Not employed		
additional employers.	Occur	oation	Deceased				Retired		
Include part-time, sea or self-employed work	isonal,	oyer's name							
Occupation may inclustudent or homemake applies.	- Linpi	oyer's address	Number Street	t			Number Street		
			City		State Zip Coo	de	City State Zip Code		
	How I	ong employed ti	here?						
					J.				
		onthly Incom	Name and Address of the Owner o						
on-filing spouse unless y	ou are separated						e, write \$0 in the space. Include your ers for that person on the lines below. If		
ou need more space, atta			or, combine the	moma	on for an emp	loye	no for that person on the mice below. If		
					For Debtor	1	For Debtor 2 or non-filing spouse		
List monthly gross payroll deductions). would be.	wages, salary, a If not paid month	nd commissions ly, calculate what	s (before all the monthly wa	2. age	\$0	.00	\$0.00		
Estimate and list mo	onthly overtime	pay.		3. •	- \$0	.00	\$0.00		
Calculate gross inc	ome. Add line 2	+ line 3		4.	60	.00	\$0.00		

Official Form 106I Schedule I: Your Income page 1

Case number (if known)

				For Debtor 1	For Debto		
	Con	y line 4 here	1	\$0.00		\$0.00	•
-	A. C. A. C. B. S.	**************************************	4.	\$0.00		<b>5</b> 0.00	
5.		all payroll deductions:	Ea	\$0.00		\$0.00	
		Tax, Medicare, and Social Security deductions	5a.	\$0.00			
		Mandatory contributions for retirement plans	5b.			\$0.00	
		Voluntary contributions for retirement plans	5c.	\$0.00	11-	\$0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$0.00		\$0.00	
	5e.	Insurance	5e.	\$0.00		\$0.00	
	5f.	Domestic support obligations	5f.	\$0.00		\$0.00	
	5g.	Union dues	5g.	\$0.00	;	\$0.00	
	5h.	Other deductions.					
		Specify:	5h.+	\$0.00		\$0.00	
6.		the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5h.	6.	\$0.00		\$0.00	
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$0.00		\$0.00	
8.	List	all other income regularly received:					
		Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00		\$0.00	
		Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.					
	8b.	Interest and dividends	8b.	\$0.00		\$0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00		\$0.00	
		Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.					
	8d.	Unemployment compensation	8d.	\$0.00		\$0.00	
		Social Security	8e.	\$0.00		67.00	
	8f.			Ψ0.00	Ψ0	07.00	
		Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.					
		Specify:	8f.	\$0.00		\$0.00	
	8g.	Pension or retirement income	8g.	\$0.00	\$54	48.47	
	8h.	Other monthly income.					
		Specify: See continuation sheet	8h. +	\$0.00	\$2,5	05.00	
9.	Add	all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	\$3,9	20.47	
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$0.00	+ \$3,9	20.47	= \$3,920.47
11.	Incli	te all other regular contributions to the expenses that you list in Soude contributions from an unmarried partner, members of your households or relatives.			r roommates	, and othe	er
	Doı	not include any amounts already included in lines 2-10 or amounts tha	t are n	ot available to pay e	expenses list	ed in Sch	edule J.
	Spe	cify:				11.	+ \$0.00
	inco	I the amount in the last column of line 10 to the amount in line 11.  me. Write that amount on the Summary of Your Assets and Liabilities applies.  you expect an increase or decrease within the year after you file to	and C	Certain Statistical Inf		12.	\$3,920.47 Combined monthly income
	П						
	V	Yes. Explain:  Decrease in Rowland Land beneficiary divide	mas.				

Debtor 1 Debtor 2	Joseph D. Taggart Fonda Taggart	Case number (if known)	
	Monthly Income (details)	For Debtor 1 For Debtor 2 or non-filing spouse \$805.00	
Row	and land	\$1,700.00	
		Totals: \$0.00 \$2.505.00	

					4 - 2 - R-1 -								
	ill in th	is inform	ation to id	entify	your case	Tagg	art	Che	ck if this	is:			
			First Name		Middle Name					ement showing	postpetiti	on	
1 8	Debtor 2 (Spouse,		First Name		Middle Name	Tagg:		_	Constitution and the second	chapter 13 expenses as of the following date:			
	United St	tates Bankrı	uptcy Court fo	or the:	MIDDLE DI	ST. OF PENNS	SYLVANIA		MM / D	D / YYYY			
- 8	Case nur (if known	0.0000000000000000000000000000000000000							IVIIVI / D	571111			
Of	ficial F	orm 10	6J					_					
Sc	hedu	le J: Yo	ur Expe	nses								12/15	
cor	rect info	rmation. If	more space	is need		nother sheet to t	ing together, both ar this form. On the top						
P	art 1:	Descri	be Your H	ouseho	old	A44							
1.	Is this	a joint case	?										
		<b>☑</b> No	ebtor 2 live i		arate househ		s for Separate House	hold of	Debtor	2.			
2.	Do you	have depe		₩ N		Per (1915) (1915) (1915) (1916	• *************************************						
	SALVEST CONTRACTOR	list Debtor 1		□ Y	es. Fill out th	nis information	Dependent's relati		o to	Dependent's age		dependent th you?	
		state the de	pendents'				-				-   Ye	es	
	names.						No. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1.					es	
											- I No		
											-   Ye		
											- 🗖 Ye		
											- II No		
3.	expens		include le other than dependents		✓ No Yes						- 🗆 Ye	25	
Р	art 2:	Estima	te Your O	ngoing	Monthly	Expenses							
to r	report ex	our expense as	es as of your	bankru er the ba	ptcy filing d	ate unless you a	are using this form as a supplemental Sche						
						assistance if you our Income (Offi	know the value of cial Form 106l.)			Your expens	ses		
4.					ses for your	residence. ground or lot.			4	1.	\$*	1,206.90	
		ncluded in			, 101 110	g. 5 a a 61 10t.							
	4a. Re	eal estate ta	xes							ła		\$162.25	
	4b. Pr	roperty, hom	neowner's, or	renter's	insurance					1b			
	4c. Ho	ome mainte	nance, repair	, and up	keep expense	es				1c		\$350.00	
	4d. Ho	omeowner's	association of	or condo	minium dues				4	ld			

	Your expe	nses
Additional mortgage payments for your residence, such as home equity loans	5	\$50.00
Utilities:		
6a. Electricity, heat, natural gas	6a.	\$300.00
6b. Water, sewer, garbage collection	6b.	\$57.00
Telephone, cell phone, Internet, satellite, and cable services	6c	\$287.50
6d. Other. Specify:	6d.	
Food and housekeeping supplies	7.	\$300.00
Childcare and children's education costs	8.	
Clothing, laundry, and dry cleaning	9.	\$80.00
). Personal care products and services	10.	\$30.00
Medical and dental expenses	11.	\$100.00
<ol><li>Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.</li></ol>	12.	\$250.00
s. Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$100.0
Charitable contributions and religious donations	14.	\$162.00
5. Insurance.		
Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a	473944994755
15b. Health insurance	15b	\$105.00
15c. Vehicle insurance		\$131.00
15d. Other insurance. Specify:	15d	
<ol> <li>Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.</li> <li>Specify: income</li> </ol>	16.	\$310.00
7. Installment or lease payments:	4,0000	
17a. Car payments for Vehicle 1	17a.	
17b. Car payments for Vehicle 2	17b.	
17c. Other. Specify:		
17d. Other. Specify:		
Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
Other payments you make to support others who do not live with you.  Specify:	19.	

	tor 1 tor 2	Joseph D. Taggart Fonda Taggart Ca	se number (if know	n)
20.		r real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income.		
	20a.	Mortgages on other property	20a.	
	20b.	Real estate taxes	20b.	
	20c.	Property, homeowner's, or renter's insurance	20c.	
	20d.	Maintenance, repair, and upkeep expenses	20d.	
	20e.	Homeowner's association or condominium dues	20e.	
21.	Other	r. Specify: Accounting/legal fees	21.	\$25.00
22.	Calcu	ulate your monthly expenses.	(=	
	22a.	Add lines 4 through 21.	22a.	\$4,006.65
	22b.	Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2.	22b.	
	22c.	Add line 22a and 22b. The result is your monthly expenses.	22c.	\$4,006.65
23.	Calcu	ulate your monthly net income.		
	23a.	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$3,920.47
	23b.	Copy your monthly expenses from line 22c above.	23b	\$4,006.65
	23c.	Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c.	(\$86.18)
24.	Do yo	ou expect an increase or decrease in your expenses within the year after you file th	nis form?	
		xample, do you expect to finish paying for your car loan within the year or do you expect ent to increase or decrease because of a modification to the terms of your mortgage?	your mortgage	
	=	Yes. Explain here: My husband died and therefore I will pay for all maintenance on hous	e and vehicle.	